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Receipt

Applicant: TINKU ACHARYA ET AL.

§ Group Art Unit:

Serial No.: 09/723,123

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Examiner:

Filed: November 27, 2000

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For: ENCODING OF WAVELET
TRANSFORMED ERROR DATA

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Atty. Dkt. No.: INTL-0210-P1-US

§

REQUEST FOR COPY OF THE OFFICIAL FILING RECEIPT

Commissioner of Patents
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Dear Sir:

The above-referenced application was filed on November 27, 2000. Applicant has not received the Official Filing Receipt.

Applicant requests a copy of the Official Filing Receipt be sent to the attorney of record at:

Timothy N. Trop
Trop, Pruner & Hu, P.C.
8554 Katy Freeway, Ste. 100
Houston, TX 77024.

Any fees required by this request should be charged to Deposit Account No. 20-1504 (INTL-0210-P1-US) and this paper is submitted in duplicate.

Respectfully submitted,

Date: 3/21/01

Timothy N. Trop, Reg. No. 28,994
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Date of Deposit: March 21, 2001

I hereby certify under 37 CFR 1.8(a) that this correspondence is being deposited with the United States Postal Service as **first class mail** with sufficient postage on the date indicated above and is addressed to the Commissioner for Patents, Washington DC 20231.

Sherry Tipton



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Bib Data Sheet

CONFIRMATION NO. 5940

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|---|---|--------------------------------|---|---|
| SERIAL NUMBER 09/723,123 | FILING DATE 11/27/2000 RULE | CLASS 382 | GROUP ART UNIT 2621 | ATTORNEY DOCKET NO. INTL-0210-P1-US (P7057X) |
| APPLICANTS Tinku Acharya, Chandler, AZ; Prabir K. Biswas, Calcutta, INDIA; Niloy J. Mitra, Calcutta, INDIA; | | | | |
| ** CONTINUING DATA ***** THIS APPLICATION IS A CIP OF 09/390,255 09/03/1999 <i>Sm</i> | | | | |
| ** FOREIGN APPLICATIONS ***** <i>Sm</i> | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 03/26/2001 | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>Sm</i> | | STATE OR COUNTRY AZ | SHEETS DRAWING 9 | TOTAL CLAIMS 15 |
| Verified and Acknowledged Examiner's Signature _____ Initials _____ | | INDEPENDENT CLAIMS 3 | | |
| ADDRESS Timothy N. Trop TROP, PRUNER & HU, P.C. Suite 100 8554 Katy Freeway Houston, TX 77024 | | | | |
| TITLE Encoding of wavelet transformed error data | | | | |
| FILING FEE RECEIVED 710 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |